NEBRASKA 1/1/00

OPTIONAL STATE SUPPLEMENTATION

STATUTORY BASIS FOR PAYMENT

Section 68-1005, Code of Nebraska, Legislative Bill 311.

EFFECTIVE DATE January 1, 1974.

ADMINISTRATION 1 Department of Heath and Human Services.

PASSALONG In compliance by the method of total expenditures.

SCOPE OF COVERAGE Optional State supplement provided to aged, blind, and disabled recipients who meet State guidelines; except those in public institutions where Medicaid is not paying for the cost of care. Persons living in the household of another receive the same State supplement as those living independently. Blind and disabled children are eligible for optional supplementation payments.

RECOVERIES. LIENS, AND ASSIGNMENTS None.

RELATIVE RESPONSIBILITY Spouse for spouse; parent for child under age 18 who is part of

household.

INCOME DISREGARDS

Aged and disabled: No disregards in addition to Federal income disregards. Income disregards for the blind include the first \$20 per month of unearned income not including SSI and the first \$85

plus one-half of the remainder of earned income.

RESOURCE **LIMITATIONS** Federal SSI resource limitations apply.

PLACE OF APPLICATION Local offices of the Department of Social Services.

FUNDING Assistance: State funds.

Administration: State funds.

INTERIM ASSISTANCE State participates.

Mandatory minimum supplementation is administered by the same agency as optional supplementation.

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PAYMENT LEVELS 1

	Combined Federal/State		State supplementation	
Living arrangements	<u>Individual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>
Living independently	\$519.00	\$769.00	\$7.00	
Living with an essential person	782.00	N/A	13.00	N/A
Room and board facility ²	455.34	890.00	114.00	377.33
Certified adult family home ⁴	657.00	1,354.00	145.00	585.00
Licensed assisted living facility	782.00	1,564.00	270.00	795.00
Licensed group home for children or child caring agency:				
Disabled	622.00	N/A	110.00	N/A
Medicaid facility	50.00	100.00	20.00	40.00

STATE ASSISTANCE FOR SPECIAL NEEDS

ADMINISTRATION Department of Heath and Human Services.

SPECIAL NEED CIRCUMSTANCES:

TRANSPORTATION COSTS

Thirty cents per mile for:

1) school attendance outside of school district; and

2) obtaining medical services if recipient used own car.

REPAIR OR PURCHASE OF FURNITURE/ APPLIANCES Repair or purchase of furniture or appliances over \$750 total cost may be included (with State office approval) if the unit lacks

essential items.

¹ Unless otherwise stated, payment levels apply equally to aged, blind, and disabled.

² Applies only to persons living in the household of another.

⁴ Includes a minimum of \$60 for personal needs allowance.

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SPECIAL NEED **CIRCUMSTANCES (CON.)**

MOVING Costs of moving may be included if the recipient is forced to move **EXPENSES**

for reasons beyond his/her control or if the recipient can obtain

lower cost shelter.

TAXES Back taxes may be included if the individual would soon lose the

home, and the plan to remain in the home is preferred by the

individual and recommended by the case worker.

HOME REPAIRS Payment for home repairs (to \$1,000) made if essential for the

recipient's health or safety.

MEALS AND The cost of meals (to \$12 per day) and lodging if verified as related

to obtaining approved health services may be granted if the

individual is away from home for more than 12 hours.

MAINTENANCE The medical and maintenance costs of a seeing eye dog may be

FOR GUIDE DOG allowed.

GUARDIAN/ An allowance not to exceed \$10 a month may be allowed if the

CONSERVATOR client has a court appointed guardian or conservator.

MEDICAID

ELIGIBILITY:

LODGING

CRITERION SSI program guidelines (title XVI).

DETERMINED BY State.

MEDICALLY NEEDY

PROGRAM

Program for the aged, blind, and disabled medically needy.

UNPAID MEDICAL The Social Security Administration does not obtain this

EXPENSES information.